EXAMPLE ONLY

Industry Verification Form, BLS 3023 NVS

Form Approved, O.M.B. No. 1220-0032

IDAHO DEPARTMENT OF LABOR

In cooperation with the U.S. Department of Labor

1	This report is authorized by law, 29 U.S.C. 2. Your cooperation is needed to make the results this survey complete, accurate, and timely.	of
2	The questions on this form concern the work location(s) using Unemployment Insurance account number 1234567890 IN Idaho.	
	XYZ ADVISORS ATTN: MARY SMITH 1310 ANY STREET 4TH FLOOR SOMECITY ID 12345-5555	
3	We need the name and direct mailing address for the business using this Unemployment Insurance account, regardless of who prepares the form. This information does not affect mailings for tax purposes. Are the name and mailing address shown in Item 2 correct for the business using this Unemployment Insurance account?	
	YES NO Please print corrections or additions to the right of the printed address in Item 2. COMPANY PERMANENTLY OUT OF BUSINESS OR MOVED OUT OF IDAHO Enter date closed or moved: SKIP to Item 9 on the back of this form	
4	n addition to your mailing address, please tell us where your business is physically located (street and number). The physical location address is the place where you conduct your business and receive deliveries, so it cannot be a Post Office Box or a rural route number. Our records show that this business in Idaho is physically located at: 234 ANY STREET COMECITY ID 12345-5555	_
	is this address correct for the location in Idaho? [] YES \rightarrow Continue with Item 5 [] NO \rightarrow Please make changes to the right of the address here in Item 4. Continue with Item 5	
5	s the following information correct for the address in Item 4? IDAHO COUNTY: ADA YESContinue with Item 6 NOPlease print corrections in this space and then continue with Item 6	
6	according to our records, the business operating under Unemployment Insurance account 1234567890 in Utana mainly provides goods and services to the general public. Is this correct? "The general public" includes individual consumers, other businesses, and organizations.)	_
] YES, we MAINLY provide goods and services to the general public] NO, we are part of a larger company and we MAINLY support other locations of OUR company	
7	Ooes this business have a website? YESPlease enter your website address here Continue with Item 8 NOContinue with Item 8	
8	Obes the business using Unemployment Insurance account 1234567890 IN UTANA Diave only one physical location in this state? (Do not count client sites or offsite projects that will last less than a year.) YES (One physical location)Continue with Item 9 on the back NO (More than one physical location) Please attach a separate sheet. For each site, (1) list physical location address, (2) show number of employees, and (3) answer Items 6 and 9 - 11. Continue with Item 9	<u>-</u>
	PLEASE CONTINUE WITH ITEM 9 ON THE BACK OF THIS PAGE.	//



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BLS 3023-NVS

		Our records show that the <i>main</i> activity of the business using U.I. number 1234567890 in IDAHO is:
	9	1234567890 in IDAHO is:

Furnishing customized investment advice to clients on a fee basis but do not have the authority to execute trades. Primary activities performed by establishments in this industry are providing financial planning advice and investment counseling to meet the goals and needs of specific clients. EXAMPLES: futures advisory services, investment advisory services, and investment research.

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While you may not do everything listed above, does the information in Item 9 accurately describe the main business in Idaho 10 during the past 12 months? (If the business has been closed, sold, or moved out of this state, please answer in terms of its former activity.) ☐ YES... Please SKIP to Item 12 □ NO....Continue with Item 11 We need detailed information to assign the correct industry code to this business. In the space provided below, describe your main business activities, goods, products, or services in this state, as though you were telling a prospective employee what you do. Then give us the approximate percentage of sales or revenues resulting from each item. See examples below. Percentages should total 100%. If you are a third party agent for the business named in Item 2, such as a payroll service or accountant, please review Items 9-11 with your client. Goods or products: What are they, and what do you do with them? Do you design, manufacture, sell directly to consumers, distribute to wholesalers, install, repair, or do something else with them? What are these goods or products made of? EXAMPLE 1: Major appliances: Sell to public 40%; Sell to retailers 30%; Repair 30% EXAMPLE 2: Install fiber optic cable 100% Manufacturers: What are your main products? What are your most important materials? What are the main production methods? EXAMPLE: Weaving cotton broadwoven fabrics 80%; Spinning cotton threads 20% Services: Describe in detail the services you provide. To whom do you provide those services? If you offer consulting, brokerage, management, or similar services, what are your major activities? EXAMPLE 1: Hair cutting & styling 65%; Manicures 25%; Facials 10% EXAMPLE 2: Long distance trucking, less than truckload 100% EXAMPLE 3: Marketing consulting: Planning strategy 60%, Sales forecasting 40% EXAMPLE 4: Cleaning private homes 100% Construction or Building Trades: Is the work mostly residential or nonresidential? Single- or multi-family? New or remodeling? EXAMPLE: Electrical contractor: Wiring new homes 51%; Electrical refurbishing of office buildings 49% List most % important activities % 100% PLEASE PRINT CLEARLY Name of person to contact if we have questions about this report. (Please print) Name: Phone: (_ ____ Date: __ Fax: (___ ___)___ If you are a third party agent, such as an accounting firm or payroll service, check here. \quad \text{Please be sure to answer Items 9-11.} 13 Please place your completed form in the postage paid envelope provided and return it to the address in Item 14 within 14 days of receiving it. Thank you for your cooperation! For questions concerning this form, contact: IDAHO DEPARTMENT OF LABOR RESEARCH AND ANALYSIS BUREAU - ES-202 317 WEST MAIN STREET BOISE, ID 83735-0670 PHONE: (208) 332-3571 OR (800) 772-2553 FAX: (208) 334-6455

Purpose and Use: The purpose of this report is to update information on your products or services. The information will be used to ensure that we assign the correct North American Industry Classification System (NAICS) code to this business location, and that our records contain the correct name and address. The information collected on this form by the Bureau of Labor Statistics and the State agencies cooperating in its statistical programs will be used for statistical and Unemployment Insurance program purposes, and other purposes in accordance with law. Time of Completion: Time of completion is estimated to vary from 2 to 30 minutes with an average of 5 minutes per form. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this information. If you have any comments regarding these estimates, or any other aspect of this survey, send them to the Bureau of Labor Statistics, Division of Occupational and Administrative Statistics (NVS), Room 4840, 2 Massachusetts Avenue N.E., Washington, D.C. 20212. You are not required to respond to the collection of information unless it displays a currently valid OMB number.